

## Investigating Community Concerns Regarding HIV Prevention Organizations' Expertise in Serving HIV-Vulnerable Populations

Denise Bellows, PhD<sup>1</sup>, Donna Howard, DrPH<sup>1</sup>, Brad Boekeloo, PhD<sup>1</sup>, Suzanne Randolph, PhD<sup>2,3</sup>

(1) University of Maryland, School of Public Health, Department of Behavioral and Community Health; (2) Community Advisory Committee, University of Maryland Prevention Research Center; (3) The MayaTech Corporation

### What Is the Problem?

- A recent study modeling the future of the human immunodeficiency virus (HIV) epidemic in the United States projected that without rapid scale-up of HIV prevention services, the HIV epidemic will greatly worsen; the status quo will lead to a 29% increase in HIV prevalence over the next 10 years.
- There is an urgent need to examine current HIV service delivery, and identify gaps as well as areas for improvement.
- Interactions of vulnerable populations with the public health system warrant further study, because their needs tend to be more debilitating and life threatening, they require intensive medical and nonmedical services, and there is evidence that this vulnerable population is increasing in size.

### What Is the Purpose of This Study?

- The purpose of this descriptive study is to understand the extent to which disconnects exist between HIV Prevention Organizations (HPOs) self-rated expertise and their service to vulnerable populations in a metropolitan region experiencing an HIV epidemic.

### What Are the Findings?

- The HPOs in this study represent community leaders providing HIV services in a region experiencing several concentrated HIV epidemics among vulnerable populations. Their low perceived expertise with several vulnerable populations suggests the need for capacity building, technical assistance, or development of stronger linkages between HPOs with complimentary population expertise.
- This study provides a necessary, but incomplete accounting of HPO service to HIV vulnerable populations and HPO expertise in a community with high HIV morbidity. Still, this case study marks an important first step in generating awareness that HIV service provider may still have needs requiring additional resources to 1) track the vulnerable populations they serve and 2) become more confident in providing care to these at-risk and marginalized populations.

### Who Should Care Most?

- HIV prevention researchers.
- HIV/AIDS-focused community-based organizations and service providers.
- Agencies who provide funding for HIV prevention and care programs and services.
- Health agencies providing HIV prevention and treatment services.
- Providers whose clients include vulnerable populations, especially those at risk for HIV.

## Recommendations for Action

- Future studies should examine the relationship between low frequency populations and service provider expertise.
- Development of metrics for provider expertise and service is necessary to improve the way we define HIV vulnerable populations.
- This study supports the growing interest in service integration and the concept of a medical home as a practice solution to engage HIV vulnerable in care.
- Research should continue to examine methods for improving service provider's expertise with vulnerable populations, as this may still be a barrier to HIV prevention.